



PATIENT

Rexy Zapata

PRESENTING CLINICAL SIGNS

Reason for Visit: ADR History: O STATES DIARRHEA FOR 2-3 WEEKS LIQUID NOTICED BLOOD ONCE AROUND 10 DAYS AGO. STRAINING TO DEFECATE. O STATES SHORTNESS OF BREATH OVER PAST MONTH. COUGHS OCCASIONAL NOTHING UNUSUAL TO O. DECREASED APPETITE OVER PAST FEW WEEKS. NO VOMIT. O CONCERNED ABOUT LABORED BREATHING. P HAS GROWTH ON L SIDE NOT GROWN BEEN THERE AWHILE. O NOTICED BLUE-ISH FILM TO EYES HAS BEEN THERE PAST COUPLE MONTHS. WALKING SLOW SEEMS MORE SCARED CONCERNED P IS BLIND.

SPECIES

Canine

BREED

Chihuahua Mix

Abnormal PE/Chem/CBC/UA Results: Physical Examination Key -- (N= Normal, A= Abnormal) CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds. EENT: Clear AU. OU: lenticular sclerosis. OD: mild scleral redness, no discharge or blepharospasm present. No nasal discharge. No cough on tracheal palpation. Oral cavity: Severe dental tartar, moderate gingivitis Musculoskeletal: BCS = 7/9. Ambulatory x 4 Uro/Perineum: No significant lesions Abd/GI: Tense, painful at cranial abdomen. No obvious masses or fluid wave palpated Lymph Nodes: No peripheral lymphadenopathy Neurological: Alert and appropriate. Painful at TL junction. No CP deficits. Skin: ~2cm, soft, movable dermal mass at cranial aspect of L stifle. Good hair coat. No ectoparasites seen Mentation: QAR Hydration: N Fecal: Not performed today

SEX

NM

RADIOGRAPHIC STUDY OF THE ABDOMEN & LUMBAR SPINE

AGE

16 Years, 6 Months

Lateral and ventrodorsal views of the abdomen totaling 2 images available for review.

RADIOGRAPHIC FINDINGS

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The abdominal serosal detail is maintained.

Suture material from prior surgery is seen in the area of the scrotum.

There appears to be increased soft tissue opacity in the position of the left division of the liver and/or splenic head. See image below.

HOSPITAL NAME

DPC Veterinary
Hospital

The gastrointestinal tract presents within the expected limits.

The intervertebral disc space L1/2 is reduced in width.

RADIOGRAPHIC DIAGNOSIS

REFERRING VET

Dr. Rivera

- Suspect left divisional liver enlargement.
- Intervertebral disc disease within the cranial lumbar spine between L1 and L2.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

53317

The radiographic presentation of the gastrointestinal tract is within normal limits. Screening for abnormalities of the wall architecture and peristalsis could be performed with superior diagnostic accuracy using ultrasound which should be considered to further define the potential hepatic enlargement as well.

DATE

8-8-22

The narrowing of the intervertebral disc space between L1 and L2 may represent uncomplicated degenerative disc disease. However, disc hernia cannot be ruled out. Correlate with the clinical signs.



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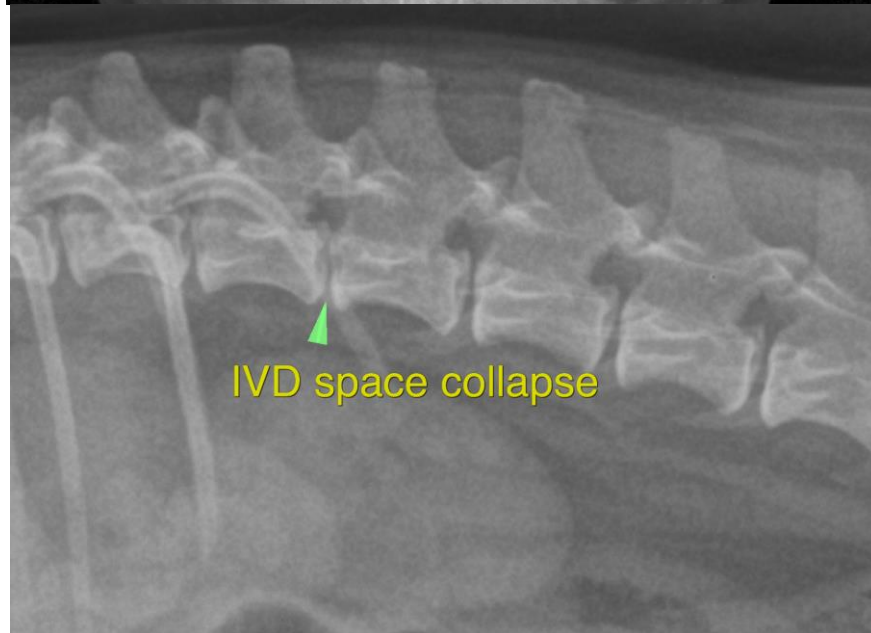
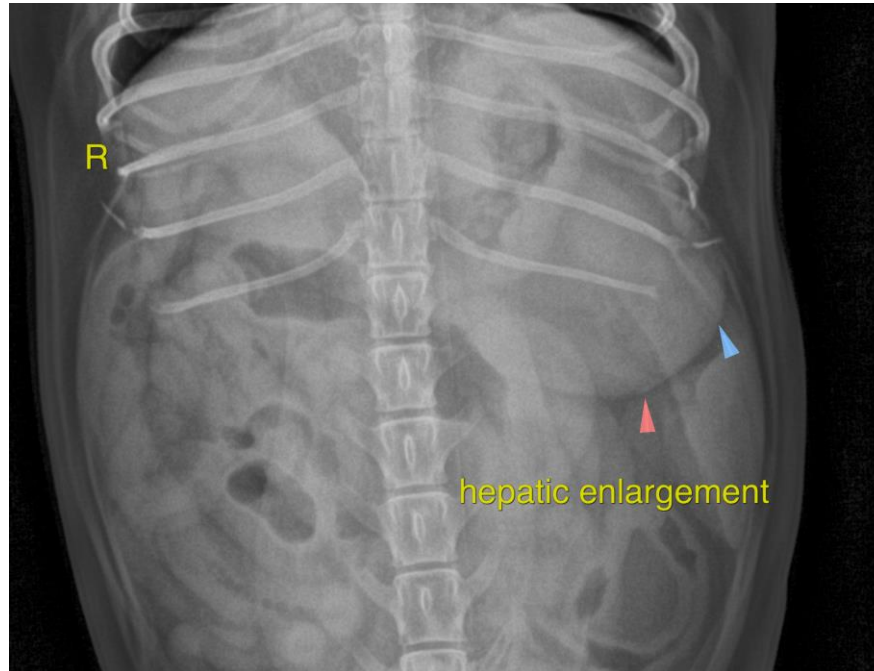
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

SPECIES

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